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08791 7590 01/13/2006

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SIMON KAHN	(Depositor's name)
<i>[Signature]</i>	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/866,101	05/25/2001	Ziv Zalman Hellman	3394P007	4558

TITLE OF INVENTION: METHOD AND SYSTEM FOR COLLABORATIVE ONTOLOGY MODELING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/13/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
TRUONG, CAM Y T		2162	707-103000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.111. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Unicorn Solutions

New York, N.Y.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date

FEB 13, 2006

Typed or printed name

SIMON KAHN

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47249

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PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.

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02 FC:1504

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